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APPLICANTS

John H. Crume, Elkhart, IN;

Omar J. Fakhoury, Rockford, IL;

Reginal A. Pete, Caledonia, IL; Charles E. Fritts, Roscoe, IL;

** CONTINUING DATA *****

by name

** FOREIGN APPLICATIONS *****

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 3	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>2/1/05</i>				
Verified and Acknowledged <i>by name</i>	Examiner's Signature	Initials		

ADDRESS

Michael Best & Friedrich LLC
 Suite 1900
 401 North Michigan Avenue
 Chicago, IL
 60611

TITLE

Sealing device for a slack adjuster

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)